

## Agency Setoff Financial Institution Non-State Agencies

Please complete the form below to receive funds from the Agency Setoff Program.

- This form must be on file with Wisconsin Department of Revenue (WI DOR) in order to receive intercept funds.
- · Do not email or fax these forms.
- · Each agency ID must have one form.

Send to:

Wisconsin Department of Revenue Setoff Coordinator Mail Stop 4-010 PO Box 8901 Madison WI 53708-8901

Indicate if this is a new agency or a	n existing agency by checking the	appropriate box:
☐ New Agency ☐ Chang	je(s) for Existing Agency – enter II	D
Legal Agency Name		
Sub-Agency Name		
Third Party Collection Agency, if used. If not use	d write "NA"	
Financial Institution Name		
Financial Institution Routing Number (9-digits)	Financial Institution Account Number	Checking or Savings (check the appropriate box)
		Checking Savings
Will these funds ultimately be transf	erred to a Financial Institution out	side of the U.S.?
☐ No ☐ Yes		
Department of Revenue Use Only	,	
Department of Revenue ose Only	•	
Agency ID Number assigned:		
Financial information updated:		